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PTO/SB/31 (09-04)

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<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number (Optional) PU040049	
I hereby certify that this correspondence is being transmitted via facsimile to "Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____		Joshua Lawrence Koslov	
Signature _____		10/589,764	Filed : August 17, 2005
Typed or printed name _____ Adele Izzo		For: Method and Apparatus for Carrier Recovery in a Communications System	
		Art Unit 2611	Examiner SUDHANSHU C. PATHAK

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ 540.00

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ \_\_\_\_\_

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☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

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☐ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

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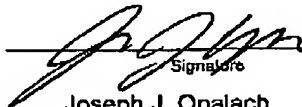
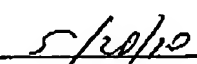
I am the

☐ applicant/inventor.

☐ assignee of record of the entire interest.  
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.  
(Form PTO/SB/06)

☒ attorney or agent of record.  
Registration number 38,229

☐ attorney or agent acting under 37 CFR 1.34.  
Registration number if acting under 37 CFR 1.34. \_\_\_\_\_

  
\_\_\_\_\_  
Signature  
Joseph J. Opalach  
\_\_\_\_\_  
Typed or printed name  
609-734-6839  
\_\_\_\_\_  
Telephone number  
  
\_\_\_\_\_  
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 2 forms are submitted.

This collection of information is required by 37 CFR 41.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 39 U.S.C. 122 and 37 CFR 1.11, 1.14 and 41.8. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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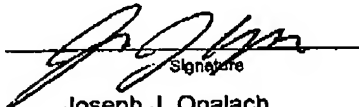
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Signature _____		10/589,764
Typed or printed name <u>Adele Izzo</u>		Filed : August 17, 2008
		For: Method and Apparatus for Carrier Recovery in a Communications System
		Art Unit 2811
		Examiner SUDHANSHU C. PATHAK
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner.		
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))		\$ 540.00
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:		\$ _____
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WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the		
<input type="checkbox"/> applicant/inventor.		 Signature
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98)		Joseph J. Opalach Typed or printed name
<input checked="" type="checkbox"/> attorney or agent of record. Registration number 36,229		609-734-6839 Telephone number
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____		<u>5/20/10</u> Date
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